# The New Hampshire Department of Health And Human Services

#### **Protocol Summary**

<u>Studies without sponsor protocols:</u> The CPHS Protocol serves as the only source of information for CPHS review. Please be very thorough in your response to each required item.

Studies with sponsor protocols or grant applications: The level of detail and organization of the sponsor protocol is such that it is frequently difficult and time consuming to identify information pertinent to The CPHS review. The majority of CPHS members will not have the full sponsor protocol to review. The CPHS protocol serves to summarize the information required for CPHS review in a format that facilitates review for all CPHS members. It may be necessary to paraphrase or copy information from the study protocol. References to the study protocol should not be used as a substitute for information required in The CPHS protocol.

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-----The following information, in this format, is required for CPHS review:

Study Title
Principal Investigator / Secondary Investigator/ Sub-Investigators
Phone number(s), e-mail address(es) for each investigator
Coordinator, Address, Phone number, e-mail address
Funding sources

**Purpose:** A brief statement of the purpose of the research project. This should include the hypothesis to be tested.

<u>Introduction:</u> Explain the background of this project so that we will understand why it is important to perform this research project. Summarize previously published data and pilot studies. Be sure to include a discussion of any data that does not support the study hypothesis. If a study similar to the one being proposed has already been completed, explain why the proposed study is necessary. For studies designed to compare or evaluate therapies, there should be a statement of the relative advantages or disadvantages of alternative modes of therapy. If not obvious, explain why human subjects are necessary. *Include references for all published data cited.* 

Methods and Materials: Describe the design, procedures, materials and methods. Use a level of detail similar to what would be used when submitting an article for publication in a peer reviewed journal. Another investigator should be able to replicate this study from the information provided in this section. Explain provisions for managing adverse reactions. Explain the study procedures and data collection and analysis process. Please operationally define terms and explain concepts which might be confusing to reviewers who are not expert in the study subject.

<u>Location of study:</u> List all sites where research will take place (e.g. hospitals, clinics, schools). Provide the FWA number for each site for any federally funded research. Include in the submission packet a letter of support for each site. It is the policy of the CPHS to not begin a review until a letter of support is in place for at least one site. Research cannot begin at a site

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until the CPHS has received a letter of support (and the FWA number, if applicable), reviewed it, and approved the site.

<u>Financial Considerations:</u> Include here any information not included in the Informed Consent. Include information about payment to participants.

**Timetable:** Estimate how long it will take to enroll enough patients to complete this study.

<u>Medical Device:</u> Please describe FDA status; include all back up information from The FDA. This information should include IDE / 510(k) designation / approval.

<u>Investigational Drug:</u> Please describe FDA status; include all back up information from FDA. This information should include IND designation / approval.

**Placebo:** If the study involves the use of a placebo or placebo condition, a description of the justification of using placebo in relation to the standard of care in this situation including, at a minimum:

- A description of the efficacy and general tolerability of the current standard treatment;
- The longest period of time that a subject could be on a placebo or in a placebo condition;
- Whether there is a process to withdraw subjects whose symptoms persist or increase while on a placebo or in a placebo condition;
- Identification of concurrent interventions subjects will receive while taking a placebo or in a placebo condition, for example: other psychopharmacology, hospitalization, or psychological therapy;
- Whether enrollment criteria specify inclusion and exclusion of potential subjects based on current or past response to treatment;
- If the research plan includes discontinuing treatments that are effective and acceptable to the subject, justification of such action;
- Description of the risks to a subject related to being treated with a placebo or being in a placebo condition; and
- Whether subjects who continue on a placebo or in a placebo condition throughout the study will be given opportunity to utilize non-placebo interventions after conclusion of the study.

<u>Genetics</u>: If the study might involve obtaining biological samples for the purpose of genetic testing, then provide a description of the psychological and social risks of this genetic research. Describe the findings in addition to those under study that might arise. If research might involve family members describe the strategies for recruiting and obtaining the consent of family members as subjects; and whether information will be requested from clinical medical records of family members.

<u>Participant Population:</u> Describe the subject population, including the procedure for selecting subjects and the anticipated age, gender, racial and ethnic make-up of the group being studies. NIH guidelines require that research involving human participation include minorities and both genders. The composition of the proposed study population must be described in terms of gender and racial/ethnic group, together with rationale for its choice. If a certain population is being excluded from the study, please provide a rationale for this exclusion.

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Describe the protections for vulnerable populations including: children, prisoners, pregnant women, fetuses, mentally disabled persons, or economically or educationally disadvantaged persons.

## If enrolling subjects who are illiterate or do not speak/read English see Attachment A:

#### **Comprehension of Informed Consent**

<b>Children:</b>	Are minor children eligible for enrollment into this study?			
If yes, respond to Attachment B Children				

If no, present an acceptable justification for the exclusion:

Note: Effective October 1, 1998, NIH guidelines require that research involving human participation include children unless there is appropriate justification for their exclusion. All proposals for human subjects research must include a description of plans for including children. If children will be excluded from the research, the proposal must present an acceptable justification for the exclusion. The investigator should address the rationale for selecting or excluding a specific age range of child, or an explanation of the reason(s) for excluding children as participants in the research. When children are included, the plan must also include a description of the expertise of the investigative team for dealing with children at the ages included, of the appropriateness of the available facilities to accommodate the children, and the inclusion of a sufficient number of children to contribute to a meaningful analysis relative to the purpose of the study.

Competency: Wi	ill this study include participa	nts that may be incompete	nt to give informed
consent?			
If yes, respond to	to Attachment C Legally Ap	pointed Surrogate Decisi	ion Makers
If no, continue			

### **Pregnancy:**

Note: Pregnant women may not be involved as participants in a biomedical research study unless:

- 1) the purpose of the activity is to meet the health needs of the mother, and the fetus will be placed at risk only to the minimum extent necessary to meet such needs or
- 2) the risk to the fetus is minimal.

If no, explain and include process for determination of pregnancy status.

If a pregnancy test is required, note who will pay.

## Women of child bearing capability

Are women of <u>child bearing capability</u> eligible for enrollment into this study?

If yes, describe potential harm to unborn fetus and process for determination of pregnancy. If a pregnancy test is required, note who will pay. If there is potential harm to an unborn fetus the investigator should review with each man/woman his/her plans to avoid pregnancy. If the investigator regards

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these contraceptive plans as inadequate, the man/woman should be advised on how to make them adequate or should be excluded from the study.

*If no*, explain and include process for determination of child bearing status for any female participants.

Students and Employees	
Are students or employees of a facility involved in the research:	
If yes, see Attachment D Students and Employees	
If no, continue	
Inclusion/Exclusion Criteria: Please provide detailed description.	

**Recruitment & Informed Consent:** Explain the process for recruiting participants. Please indicate person(s) designated to obtain Informed Consent and how consent will be documented. Also include any process involving "finder fees" or incentives (bonus payment, gift certificate etc.) to study personnel for enrollment of participants. Any advertisements that will be used in recruiting subjects should be included with this protocol summary.

Describe the methods to be used to screen potential subjects to determine whether they have understood the details of the consent form. If any instruments are being used for this purpose, please forward a copy with the submission packet. Explain what will occur if a potential subject does not understand the details of the consent form.

Federal regulations allow for waiver of informed consent and waiver of documentation of informed consent in special circumstances. Please see:

Attachment E for Waiver of Informed Consent; and Attachment F Waiver of Documentation of Informed Consent

<u>Risks:</u> Describe any potential risks (physical, biological, psychological, social, legal, occupational, financial, or other) and assess their likelihood and seriousness. Describe the procedure for protecting against and/or minimizing any potential risks, including risks to confidentiality, and assess their likely effectiveness. Please list risks from most severe/likely to least severe/unlikely. Will a certificate of confidentiality be necessary?

**Risk/Benefit Analysis:** Describe why the risks to subjects are reasonable in relation to the anticipated benefits to participants and/or society, and in relation to the importance of the knowledge that may reasonably be expected to result, thereby falling in favor of performing the study.

**<u>Data and Safety Monitoring</u>**: Provide a description of the plans for data and safety monitoring including, at a minimum, plans to monitor:

- The progress of the study;
- Data quality and timeliness;
- Subject recruitment, accrual and retention;
- Subject risk versus benefit;
- Scientific or therapeutic developments that in the opinion of the PI may have an impact on the safety of the subjects or the ethics of the study; and
- Other factors determined by the PI to affect subject outcomes;

NH DHHS NH IRB Protocol Summary <u>Statistical Methods and Review Statement</u>: Justify the sample size used including any randomization, stratification, etc., and the techniques used, with a power analysis if applicable. Briefly describe the study endpoint(s) and the criteria to determine a positive result. A statement documenting statistical review by an expert may facilitate review.

### **Potential Conflict of Interest for Investigator:**

Describe the financial relationship between the PI and commercial sponsor and whether any compensation is affected by the study outcome. Is payment made directly to the PI or to the institution employing the PI? If applicable, what is the amount of payment per participant?

Acknowledge if any of the following potential conflicts exist and state the member(s) of the research team involved:

The PI, immediate family of the PI, or the institution employing the PI has any proprietary interests in the product including but not limited to patents, trademarks, copyrights, and licensing agreements.

The PI, research staff, or an immediate family member of the PI or research staff has equity interest in the sponsor company greater than \$10,000 or 5% ownership.

The PI, research staff, or an immediate family member of the PI or research staff receives payments of other sorts from the sponsor company greater than \$10,000 per year in excess of reimbursement of study costs including but not limited to: grants, compensation in the form of equipment, retainers for ongoing consultation, and honoraria. If such exists, describe the specific arrangements for payment.

<u>Publishing Restrictions:</u> Please explain any contractual agreements which restrict your ability to publish data generated by your participation in this study

#### Submit this form to the CPHS office. Be sure to also include:

- A copy of any grant application or protocol for the same study submitted to the U. S. Department of Health and Human Services or FDA, if applicable;
- A completed and signed Human Subjects Review Form
- A copy of any applicable investigator's brochures
- A copy of the consent form pursuant to He-M 206.05;
- Letters of support from the community organizations or institutions where the study is to be carried out;
- Copies of written materials used in the study and to which subjects might be exposed, such
  as assessment tools that are not standard, scripts, treatment manuals that are not standard,
  advertisements; or handouts.
- Documentation that the PI and other research staff have completed training in human subjects protections.

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## Attachment A Comprehension of Informed Consent

The language of the informed consent must be written so as to be understandable by the population being studied.

Subjects who are unable to read should not be excluded from research on the grounds of limited English proficiency unless the inability to read prevents the subject from participating in the study in a valid way (i.e. Subject cannot participate in a therapy group being studied, because he or she cannot utilize the workbook.) If a subject is unable to read or if a legal representative is unable to read, an impartial witness shall be present during the entire informed consent discussion.

Subjects whose first language is not English should not be excluded from research on these grounds alone unless the inability to speak or understand English proficiently prevents the subject from participating in the study in a valid way. If a subject, or their legal representative, has a limited proficiency in English it is incumbent on the investigator to assure that the subject understands the language of the informed consent document. The PI may have a translator prepare a consent form in the subject's native language and have a translator or other person fluent in both the subject's language and English translate while the subject asks questions. Alternatively, the PI may ask that a family member, friend, translator or other individual proficient in both the subject's primary language and in English to read and explain the information in the informed consent. This is to be done in the presence of the investigator or other research staff who can answer questions about the study.

After the written consent form and any other written information to be provided to subjects is read/translated and explained to the subject or the subject's legal representative, and after the subject or the subject's legal representative has orally consented to the subject's participation in the trial, and, if capable of doing so, has signed and personally dated the consent form, the witness or translator must sign and personally date the consent form. By signing the consent form, the witness/translator attests that the information in the consent form, and any other written information was accurately explained to, and apparently understood by, the subject or the subject's legal representative, and that informed consent was freely given by the subject or the subject's legal representative.

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## Attachment B Children

If a study involves minors (in NH < 18yrs) please complete sections 1, 2 and 3 below:

### Section 1. Designation Risk / Benefit: Check the risk designation as you deem appropriate:

- [ ] 1. Research not involving greater than minimal risk [45 CFR 46.404]. *Minimal risk* means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.
- [ ] 2. Research involving greater than minimal risk but presenting the prospect of direct benefit to the individual participants will be approved by the CPHS only if
- a) the risk is justified by the anticipated benefit to the subjects;
- b) the relation of the anticipated benefits to the risk is at least as favorable to the subjects as that presented by available alternative approaches [45CFR46.405].
- [ ] 3. Research involving greater than minimal risk and no prospect of direct benefit to individual participants, but likely to yield generalizable knowledge about the participants condition will be approved only if
- a) the risk represents a minor increase over minimal risk
- b) the intervention or procedure presents experiences to participants that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social or educational situations;
- c) intervention or procedure is likely to yield generalizable knowledge about the subjects' disorder or condition which is of vital importance for the understanding of the participants condition [45CFR46.406].
- [ ] **4.** Research that is otherwise not approvable, but which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children. Research that is not approvable under numbers 1,2, and 3, above, may be conducted, provided that CPHS, after consultation with a panel of experts, finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a significant problem affecting the health and welfare of children. The panel of experts must also find that the research will be conducted in accordance with sound ethical principles [45 CFR 46.407].

**Section 2. Parental consent** - Please circle a or b as you deem appropriate for this study:

- a. Active parental consent required by at least one parent (for 1 and 2 above only)
- b. Active parental consent required by both parents (required for 3 and 4 above)
- c. Parental consent waived (See Attachment F)
- **Section 3. Assent of Minor -** It is important the PI includes the minor in all aspects of the research as appropriate for his/her maturity level. The Assent signature line may be included on all consent forms where minors may be enrolled. However the requirement for obtaining a signature is determined on the nature of the study. Please indicate below your view the requirement of assent for this study:
- a. <u>Assent signature required:</u> This study does not involve interventions likely to be of benefit to minors. However, they should be able to comprehend and appreciate what it means to be a volunteer for the benefit of others
- b. Assent signature **not** required: The inclusion of the minor in all aspects of the research will be conducted as appropriate. However the possibility of direct benefit that is important to the health or well-being of the minor is available only in the context of this research and/or the minor is unlikely to understand the situation well enough to give meaningful assent.

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## Attachment C Legally Appointed Surrogate Decision Makers

Legal representative in this context shall refer to:

- The court appointed guardian of a minor child;
- The guardian over person of an incapacitated adult appointed pursuant to RSA 464-A.
- A person acting as a patient advocate as appointed by a durable power of attorney for health care (DPOAHC).

The Division of Behavioral Health does not recognize next-of-kin as having authority to consent for an incapacitated individual to participate in research.

This policy does not apply to parents of a minor child unless one or both parents has been appointed guardian over person by the court.

Guardians over person cannot consent to their wards participation in research that involves experimental treatment without the permission of the probate court. "Experimental treatment" in this context refers to medical treatments that are introduced to a subject based on a study protocol rather than individual treatment.

Persons with a Durable Power of Attorney Over Health Care (DPOAHC) may be entered into research without further approval from the court. The patient advocate, however, is required to follow guidelines and the wishes of the individual.

If a PI proposes to obtain consent from a legally authorized surrogate decision maker for an individual to participate in research, the PI shall answer the following questions:

- Why is the inclusion of subjects who do not have the capacity to give informed consent essential to the design of the research study?
- Could the subject receive the same management that they will receive in the research study outside the setting of a research protocol?
- Will participation in the study increase the risk of harm or discomfort compared to what is expected with the management that the subject will receive if they do not participate in the research study?
- Will participating in the study increase the chance that the subject will experience a favorable outcome compared to what is expected with the management that the subject will receive if they do not participate in the research study?
- What is the magnitude of the benefit that future patients, or society in general, may experience as a result of the subject participating in this study?
- Describe what procedures are proposed to elicit the assent of subjects who do not have the capacity to give informed consent.
- Describe what procedures are proposed to ensure that if a proposed study involves experimental treatment, the Probate Court has authorized a guardian to enroll an incapacitated adult in the study.
- The CPHS allows for a short form of the consent to be presented to children and incapacitated adults.

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## Attachment D Research Involving Students and Employees

One of the primary responsibilities of the CPHS is to ensure that a participant's decision to participate in research will be voluntary and that consent will be sought "only under circumstances that provide the prospective subject... sufficient opportunity to consider whether to participate and that minimize the possibility of coercion or undue influence." Students and employees may be vulnerable to "subtle inducements to participate".

The researcher who plans to recruit either population must define clearly the participants to be enrolled and the rationale for their participation. In addition, the mode and timing of recruitment must be explained.

Another special consideration for employee and student populations is the issue of confidentiality of research data. Depending on the nature of the research and the data collected, a break of confidentiality could affect a person's employment, career path, educational plans, or social relationship with the hospital/academic community. Therefore, the researcher should document carefully the methods to protect the subjects' identity and research data (e.g., coding, storage of research files, limits of accessibility to research data, etc.).

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### Attachment E Waiver of Informed Consent

### For certain types of public benefit programs

An IRB may approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent set forth above, or waive the requirement to obtain informed consent provided the IRB finds and documents that:

- (1) the research or demonstration project is to be conducted by or subject to the approval of state or local government officials and is designed to study, evaluate, or otherwise examine: (i) public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs; and
- (2) the research could not practicably be carried out without the waiver or alteration.

#### For certain minimal risk studies:

Federal regulations allow an IRB to approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent, or waive the requirements to obtain informed consent provided the IRB finds and documents that:

- (1) the research involves no more than minimal risk to the subjects;
- (2) the waiver or alteration will not adversely affect the rights and welfare of the subjects;
- (3) the research could not practicably be carried out without the waiver or alteration; and
- (4) whenever appropriate, the subjects will be provided with additional pertinent information after participation.

The PI may request an alteration or waiver to the consent process provided their study meets the above criteria. In this attachment, the Protocol Summary or Expedited Review Form, the PI needs to describe why the study meets these criteria. CPHS members reviewing the study materials will make a final determination if the consent process can be waived or altered based on the federal guidelines and information provided by the PI.

Please note: Studies requesting an alteration/waiver of consent procedures for studies involving protected health information (PHI) may also be subject to HIPAA regulations. If the study you are proposing involves PHI, please use the Medical Records/Chart Review Study Form in attachment C of the Expedited Review Study Form.

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## Attachment F Waiver of Documentation of Consent

Federal regulations provide for the waiver of signed documentation of consent as described below:

The CPHS may waive the requirement to obtain a signed consent form for some or all subjects if:

(1) The only record linking the subject and the research would be the consent document, and the principal risk would be potential harm resulting from a breach of confidentiality.

OR

(2) The research presents no more than minimal risk of harm to subject and involves no procedures for which written consent is normally required outside of the research context.

In cases in which the documentation requirement is waived, The CPHS may require the investigator to provide subjects with a written statement (information sheet) describing the research.

The PI may request a waiver to documented consent provided the study meets the above criteria. In this attachment, the Protocol Summary, or Expedited Review Form, the PI shall describe why the study meets these criteria. CPHS members reviewing the study materials will make a final determination of whether documentation of consent can be waived or altered based on the federal guidelines and information provided by the PI.

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